

## SCHOOL OF INTEGRATIVE HEALTH/ NDMU GRADE APPEAL FORM

---

An academic dispute is a disagreement between faculty and a student about a grade or other issue related to classroom instruction. **Academic disputes do not progress beyond the faculty unless, at the end of the course, the dispute affects the final grade of the course.** In such circumstances, if the student cannot resolve the issue by meeting with the course instructor, the student may appeal the decision through the Department Chair.

To appeal the faculty's decision, students must email this form and accompanying documents to the relevant Department Chair. If the Department Chair is the instructor for the course, the form should instead be emailed to the Dean of Academic Affairs. The form must be emailed within **2 weeks** of the end of the course. Grade appeals will not be considered if the form is not emailed within this timeframe.

Students are advised to review the Section 2.2 Academic Dispute Resolution in the SOIH Grading in Academic Courses Policy at <https://www.ndm.edu/academics/integrative-health/soih-policies-forms>

Student Name:	Date:
Email:	Phone Number:
Course Number:	Course Section:
Course Title:	
Trimester:	Grade Received:

Instructors have the right to judge the quality of academic work for their courses.  
Appeals are only considered by the Department Chair when they meet one or more of the following criteria.

Please indicate which of the following criteria are being used as a basis for the appeal  
(check all that apply):

- ☐ Instructor violated the terms of the syllabus.
- ☐ Instructor made a factual error in calculating or recording a grade.
- ☐ Instructor's grading was not aligned with assignment rubric(s)
- ☐ Instructor applied an inconsistent grading standard across students.
- ☐ Instructor violated a university policy when giving assignments or assigning grades.

In submitting a grade appeal, students must identify the specific assignment(s) which they wish to be reviewed along with a rationale for the appeal. Please list assignments:

The following supporting documentation is required and must be submitted at the time of the appeal:

1. Explanation of what occurred and how the criteria checked above apply to the situation
2. Timeline of events relevant to the appeal
3. Copies of graded assignment(s) or exam(s) in question (Note: only needed if assignments are hard copy and not viewable in Canvas)
4. Any other documentation supporting the appeal

***NOTE: Students should keep a copy of this form and all documentation and attachments for their records.***

The student will be notified in writing of the reviewer's decision. The decision of the Department Chair is final unless the Chair is the instructor. In such instances the Dean of Academic Affairs will make and communicate the final decision.

**The Department Chair has one week from submission of this form to provide a final decision to the student.**

#### **STUDENT DECLARATION AND SIGNATURE**

I declare that the information on this form and all supporting documentation is accurate and complete to the best of my knowledge.

Student Signature: \_\_\_\_\_  
(Type your name as your signature.)

Date: \_\_\_\_\_

**SCHOOL OF INTEGRATIVE HEALTH / NDMU**  
**GRADE APPEAL WORKSHEET**

***FOR DEPARTMENT CHAIR ONLY***

---

Department Chairs must use this worksheet to document decisions on grade appeals. The department must keep a copy of this completed worksheet along with a copy of the student’s original appeal form and accompanying documents. The Department Chair has one week from submission of this form to provide a final decision to the student.

Date form was received from student:

Grade Appeal:

Student Name:	Course Number:
Course Title:	Course Section:
Trimester:	Grade Received:

Appeal Form Received by:

Name
Department Title

The Department Chair has consulted with the following Faculty member(s).

Name	Date
Name	Date

The Department Chair has consulted with the following student.

Name	Date
------	------

**Results of the Investigation:**

**Final decision:**

- ☐ No assignment grade(s) adjusted  
☐ Assignment grade(s) adjusted

Details (if assignment grades adjusted):

Final Course Grade (after any assignment grade adjustments): \_

*NOTE: If the result of the appeal leads to a change in final course grade, the faculty and Department Chair must complete the CHANGE OF GRADE NOTIFICATION form.*

**Student Notification:**

☐ Student has been notified of final decision.

Date: \_\_\_\_\_

**Department Chair Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Type your name as your signature.)

*Note: The Department Chair is to maintain all records of this appeal in the Department files.*